

## Employer's Lobbying Expenses

THIS SPACE FOR OFFICE USE

		1/1	BATE FILED PD
1. Employer's Name (Use complete comple	ompany, association, union or entity i	name.)	The PD
NW Dairy Association & [			
Attention (Identify person to whom i	—— FEB 28 2018		
Steve Matzen			
Mailing Address		Telephone	,
PO Box 79007		(206) 286-6745	
City	State	Zip + 4	
Seattle	WA	98119	

THIS REPORT MUST BE FILED BY THE LAST DAY OF FEBRUARY. Include expenditures made and accrued during the previous calendar year for lobbying the Washington State Legislature and/or any state agency. Complete all sections. Use "none" or "0" when applicable.

Identify each of your lobbyists/lobbying firms below. In column 1, show the full amount of salary or fee each earned for lobbying. In column 2, show the full amount paid (plus obligated) for other lobbying related expenses that were made by or through the lobbyist and reported by the lobbyist on the monthly L-2 report (e.g., contributions to legislative candidates, reimbursement for entertainment expenses, etc.). Compute the subtotals across and down the

columns; put the grand total of expenses in	ncurred by or through lobbyists in the space	e desig	nated.	.,		25777 2115	
Names of Registered Lobbyists (if payments were to lobbying firm, list firm name)		1	Col 1-Salary	Col 2-Other	Total Amount		
Coyne, Jesernig, LLC		s	72,000.00	\$ 0.00	s	72,000.00	
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	Total From Attached Pag	e					
☐ Information continued on attached pages		т	otal Expenses By	or Through Lobbyists	\$	72,000.00	
DO NOT INCLUDE EXPENDITURES ALREADY ACCOUNTED FOR IN ITEM 2 ABOVE when completing Items 3 through 7 below.							
3. Other expenditures made by the employer				_		e e	
a. to vendors on behalf of or in support of registered lobbyists (e.g., entertainment credit card purchases);				\$			
b. to or on behalf of expert witnesses or others retained to provide lobbying services who offer specialized knowledge or expertise that assists the emplyer's lobbying effort;							
c. for entertainment, tickets, passes, travel expenses (e.g., transportation, meals, lodging, etc.) and enrollment or course fees provided to legislators, state officials, state employees and members of their immediate families; (Also complete Item 9.)							
d. for composing, designing, producing as	d. for composing, designing, producing and distributing informational materials for use primarily to influence legislation; and						
e. for grass roots lobbying expenses, including those previously reported by employer on Form L-6, and payments for lobbying communications to clients/customers (other than to corporate stockholders and members of an organization or union).							
<ol> <li>Political contributions to candidates for legislative or statewide executive office, committees supporting or opposing these candidates, or committees supporting or opposing statewide ballot measures. (Also complete Item 10.)</li> <li>a. Contributions made directly by the employer, including those previously reported on PDC Form L-3c.</li> </ol>							
b. If contributions were made by a political committee associated, affiliated or sponsored by the employer, show the PAC name below. (Information reported by the PAC on C-4 reports need not be again included as part of this L-3 report.)						<del>/////////////////////////////////////</del>	
Name of PAC NORTHWEST DAIRYMENS POLITICAL EDUCATION COMMITTEE SPONSORED BY DARIGOLD  5. Independent expenditures supporting or opposing a candidate for legislative or statewide executive office or a statewide ballot measure. (Also complete Item 11.)							
6. Expenditures to or on behalf of legislators, state officials, their spouses and dependents for the purpose of influencing, honoring or benefiting the legislator or official. (Normal course of business payments are not reportable.) (Also complete Item 14.)							
7. Other lobbying-related expenditures, whether through or on behalf of a registered lobbyist. Attach list itemizing each expense							
(i.e., show date, recipient, purpose and am	ount). Do not include payments accounted	d for ab	ove.		٠	<del></del>	
		_		bying Expenses (Items 2 thru 7)	\$	72,000.00	
8. This report must be certified by the preside							
Certification: I certify that this report is true, complete and correct to the best of my knowledge.  Signature of Employer Officer			Date .				
Printed Name and Title of Officer: Steve Matzen, Vice President				2/7/2018			

Employer's Name	ployer's Name Year report covers:							
9. Entertainment, tickets, passes, travel expenses (including transportation, meals, lodging, etc.) and enrollment or course fees provided to legislators, state officials, state employees and members of their immediate families. See instruction manual for details.								
Name and Title		Cost or Value	Date and Description of Expense					
1		\$	•					
1								
Information continued on attached pages								
10. Contributions (not reported by the lobbyist) totalling	over \$25 to a legislative or state	wide executive office	candidate, a committee formed to support or					
oppose one of these candidates or a committee sur	oporting or opposing a statewide	ballot measure. Do	not list employer-affiliated PAC contributions.					
Name of Recipient	Name of Recipient		Date (and, if In-Kind, Description)					
1		\$						
			~					
,								
☐ Information continued on attached pages								
11. Independent expenditures in support of or oppositio	n to a) a legislative or statewide	evecutive office cand	idate or h) a statewide heliet presention					
See Instruction manual for definition of "independent of the second of t	ndent expenditure."	evecative office calld	date of by a statewide ballot proposition.					
Candidate's Name, Office Sought Ballot Proposition Number & Brief D		Amount	Date and Description of Expense (Note if Support or Oppose)					
•		\$ .						
	•		_					
Information continued on attached pages  12. Compensation of \$1,500 or more during the preceding the	ng calendar year for employmen	of or professional sen	ices paid to state elected efficiety averageful					
candidates for state office and each member of their	r immediate family.	. or professional serv	ices paid to state elected officials, successful					
Name	Relationship to Candidate or Elected Official if Member of Family	Amount (Code)**	Description of Consideration or Services Exchanged for Compensation					
	·							
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☐ Information continued on attached pages			•					
<ol> <li>Compensation of \$1,500 or more during the precedi or other entity in which state elected official, success ownership interest of 10% or more.</li> </ol>	ng calendar year for professions sful state candidate or member	al services paid to any of their immediate fan	corporation, partnership, joint venture, association nily hold office, partnership, directorship or					
Firm Name	Person's Name	Amount (Code)**	Description of Consideration or Services Exchanged for Compensation					
			•					
	,							
Information continued on attached pages  14. Any expenditure, not otherwise reported, made direct	the or indirectly to a state electe	d official successful	andidate for state office or manh as of their					
immediate family, if made to honor, influence or ben	efit the person because of his o	r her official position.	andidate for state office of member of their					
Name		Amount	Date and Purpose					
,		\$						
☐ Information continued on attached pages								
**DOLLAR	•	**DOLLAF						
CODE AMO	UNT	CODE	AMOUNT					
A : M4 1 - M0 1								

A - \$1 to \$2,999 B - \$3,000 to \$14,999 C - \$15,000 to \$29,999

D - \$30,000 to \$74,999 E - \$75,000 or more